

Project/Location: GSA MELVIN PRICE FED COURTHOUSE- EAST ST LOUIS, MO										Contract No.: 47PF0019C0092	
Payroll No. 46		For week ending: 1/9/21									
			Day and Date								
Name, Address	Tax/ Dep	Work Classification	S	M	T	W	T	F	S	Rate	Fringe
			3	4	5	6	7	8	9		
Bruce Armstrong (b) (6) (b) (6)	M 0	ELEVATOR MECHANIC		8	8	8	8	8		50.09 75.135	37.71 37.71
TIMOTHY LAUGHLIN (b) (6)	S 0	MECHANIC APPRENTICE		8	8	8	8	8		25.05 37.568	36.71 36.71
VICTOR MC CALL (b) (6) (b) (6)	M 1	ELEVATOR MECHANIC								50.09 75.135	37.71 37.71

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.23 SS				
									29.05 MED				
												3,070.35	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	121.92 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED				
												2,271.65	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				311.19 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.34 SS			5,342.00	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.57 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 3 day of January 2021 and ending the 9 day of January 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	





PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.06 MED			3,070.35	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	121.92 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED			2,271.64	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				311.19 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,341.99	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.59 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 10 day of January 2021 and ending the 16 day of January 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

Project/Location: GSA MELVIN PRICE FED COURTHOUSE- EAST ST LOUIS, MO										Contract No.: 47PF0019C0092	
Payroll No. 48		For week ending: 1/23/21									
			Day and Date								
Name, Address	Tax/ Dep	Work Classification	S	M	T	W	T	F	S	Rate	Fringe
			17	18	19	20	21	22	23		
Bruce Armstrong	M	ELEVATOR		8	8	8	8	8		50.09	37.71
(b) (6)	0	MECHANIC								75.135	37.71
(b) (6)											
TIMOTHY LAUGHLIN	S	MECHANIC		8						25.05	36.71
(b) (6)	0	APPRENTICE								37.568	36.71
VICTOR MC CALL	M	ELEVATOR								50.09	37.71
(b) (6)	1	MECHANIC								75.135	37.71
(b) (6)											

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,070.36	
LAUGHLIN,TIMOTHY SHANE	8.00			200.36									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			8.00 FR			293.68 FR							
Rate: 36.7100								494.04	12.44 FIT			Memo	<input type="checkbox"/>
									12.43 SS				
									2.90 MED				
												466.27	
DEPT TOTAL 000002	48.00 REG			2,203.96 REG	.00 O/T				201.71 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	1,802.16 EARNINGS 4				136.65 SS			3,536.63	
	.00 HOURS 3			.00 EARNINGS 5	4,006.12 GROSS				31.95 MED				
	48.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	48.00	FR	Fringe
EARNINGS ANALYSIS:	1,802.16	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 17 day of January 2021 and ending the 23 day of January 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.23 SS				
									29.05 MED				
												3,070.35	
DEPT TOTAL	40.00 REG			2,003.60 REG	.00 O/T				189.27 FIT		.00 TOTAL DEDUCTIONS	1 Pays	<input type="checkbox"/>
000002	.00 O/T			.00 EARNINGS 3	1,508.48 EARNINGS 4				124.23 SS			3,070.35	
	.00 HOURS 3			.00 EARNINGS 5	3,512.08 GROSS				29.05 MED				
	40.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	40.00	FR	Fringe
EARNINGS ANALYSIS:	1,508.48	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 24 day of January 2021 and ending the 30 day of January 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	



[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	273.13 N MEDINS 273.13- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,070.36	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	121.92 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED				
												2,271.65	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				311.19 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,342.01	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.57 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	273.13	N MEDINS	273.13- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 21 day of February 2021 and ending the 27 day of February 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	273.13 N MEDINS 273.13- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,070.36	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	121.92 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED				
												2,271.65	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				311.19 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,342.01	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.57 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	273.13	N MEDINS	273.13- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 31 day of January 2021 and ending the 6 day of February 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	273.13 N MEDINS 273.13- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.06 MED				
												3,070.35	
DEPT TOTAL	40.00 REG			2,003.60 REG	.00 O/T				189.27 FIT		.00 TOTAL DEDUCTIONS	1 Pays	<input type="checkbox"/>
000002	.00 O/T			.00 EARNINGS 3	1,508.48 EARNINGS 4				124.22 SS			3,070.35	
	.00 HOURS 3			.00 EARNINGS 5	3,512.08 GROSS				29.06 MED				
	40.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	40.00	FR	Fringe
EARNINGS ANALYSIS:	1,508.48	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	273.13	N MEDINS	273.13- U MEDREI



I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 7 day of February 2021 and ending the 13 day of February 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

Project/Location: GSA MELVIN PRICE FED COURTHOUSE- EAST ST LOUIS, MO										Contract No.: 47PF0019C0092	
Payroll No. 52		For week ending: 2/20/21									
			Day and Date								
Name, Address	Tax/ Dep	Work Classification	S	M	T	W	T	F	S	Rate	Fringe
			14	15	16	17	18	19	20		
Bruce Armstrong	M	ELEVATOR		8	8	8	8	8		50.09	37.71
(b) (6)	0	MECHANIC								75.135	37.71
(b) (6)											
TIMOTHY LAUGHLIN	S	MECHANIC								25.05	36.71
(b) (6)	0	APPRENTICE								37.568	36.71
VICTOR MC CALL	M	ELEVATOR								50.09	37.71
(b) (6)	1	MECHANIC								75.135	37.71
(b) (6)											

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	273.13 N MEDINS 273.13- U MEDREI	Memo	<input type="checkbox"/>
									124.23 SS				
									29.05 MED				
												3,070.35	
DEPT TOTAL	40.00 REG			2,003.60 REG	.00 O/T				189.27 FIT				1 Pays <input type="checkbox"/>
000002	.00 O/T			.00 EARNINGS 3		1,508.48 EARNINGS 4			124.23 SS		.00 TOTAL DEDUCTIONS		3,070.35
	.00 HOURS 3			.00 EARNINGS 5		3,512.08 GROSS			29.05 MED				
	40.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	40.00	FR	Fringe
EARNINGS ANALYSIS:	1,508.48	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	273.13	N MEDINS	273.13- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 14 day of February 2021 and ending the 20 day of February 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	<input checked="" type="checkbox"/>
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE File: 000101 H Dept: 000090 W Dept: 000002 Rate: 50.0900  Dept: 000002 Rate: 37.7120	40.00			2,003.60									
			40.00 E			1,508.48 E		3,512.08	192.14 FIT 124.23 SS 29.05 MED	173.85 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo <input type="checkbox"/>	2,992.81
LAUGHLIN,TIMOTHY SHANE File: 000178 H Dept: 000099 W Dept: 000002 Rate: 25.0450  Dept: 000002 Rate: 36.7100	24.00			601.08									
			24.00 E			881.04 E		1,482.12	59.56 FIT 37.27 SS 8.72 MED			Memo <input type="checkbox"/>	1,376.57
DEPT TOTAL 000002	64.00 REG .00 O/T 64.00 HOURS 3 .00 HOURS 4			2,604.68 REG 2,389.52 EARNINGS 3 .00 EARNINGS 5	.00 O/T .00 EARNINGS 4		4,994.20 GROSS		251.70 FIT 161.50 SS 37.77 MED 173.85 STATE		.00 TOTAL DEDUCTIONS	2 Pays <input type="checkbox"/> 4,369.38	

HOURS ANALYSIS:	64.00	E	FRINGE
EARNINGS ANALYSIS:	2,389.52	E	FRINGE
STATUTORY DED. ANALYSIS:	173.85	43	IL
VOLUNTARY DED. ANALYSIS:	263.33	N	MEDINS 263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 23 day of February 2020 and ending the 29 day of February 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

Project/Location: GSA MELVIN PRICE FED COURTHOUSE- EAST ST LOUIS, MO										Contract No.: 47PF0019C0092	
Payroll No. 54		For week ending: 3/6/21									
			Day and Date								
Name, Address	Tax/ Dep	Work Classification	S	M	T	W	T	F	S	Rate	Fringe
			28	1	2	3	4	5	6		
Bruce Armstrong (b) (6) (b) (6)	M 0	ELEVATOR MECHANIC		8	8	8	8	8		50.09 75.135	37.71 37.71
TIMOTHY LAUGHLIN (b) (6)	S 0	MECHANIC APPRENTICE		8	8	8	8	8		25.05 37.568	36.71 36.71
VICTOR MC CALL (b) (6) (b) (6)	M 1	ELEVATOR MECHANIC								50.09 75.135	37.71 37.71



PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	273.13 N MEDINS 273.13- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,070.36	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	121.92 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,271.64	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				311.19 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,342.00	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	273.13	N MEDINS	273.13- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 28 day of February 2021 and ending the 6 day of March 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
H Dept: 000090													
W Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 F			1,508.48 F							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS	263.33- U MEDREI	Memo <input type="checkbox"/>
									124.22 SS				
									29.05 MED				3,067.49
LAUGHLIN,TIMOTHY SHANE	24.00			601.08									
File: 000178													
H Dept: 000099													
W Dept: 000002													
Rate: 25.0450													
Dept: 000002			24.00 F			881.04 F							
Rate: 36.7100								1,482.12	59.56 FIT				Memo <input type="checkbox"/>
									37.27 SS				
									8.71 MED				1,376.58
DEPT TOTAL 000002	64.00 REG			2,604.68 REG	.00 O/T				251.70 FIT		.00 TOTAL DEDUCTIONS		2 Pays <input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,389.52 EARNINGS 4				161.49 SS				4,444.07
	.00 HOURS 3			.00 EARNINGS 5	4,994.20 GROSS				37.76 MED				
	64.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	64.00	F	FRINGE
EARNINGS ANALYSIS:	2,389.52	F	FRINGE
STATUTORY DED. ANALYSIS:	99.18	43	IL
VOLUNTARY DED. ANALYSIS:	263.33	N	MEDINS
			263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 1 day of March 2020 and ending the 7 day of March 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

Project/Location: GSA MELVIN PRICE FED COURTHOUSE- EAST ST LOUIS, MO										Contract No.: 47PF0019C0092	
Payroll No. 55		For week ending: 3/13/21									
			Day and Date								
Name, Address	Tax/ Dep	Work Classification	S	M	T	W	T	F	S	Rate	Fringe
			7	8	9	10	11	12	13		
Bruce Armstrong (b) (6) (b) (6)	M 0	ELEVATOR MECHANIC		8	8	8	8	8		50.09 75.135	37.71 37.71
TIMOTHY LAUGHLIN (b) (6)	S 0	MECHANIC APPRENTICE		8	8	8	8	8		25.05 37.568	36.71 36.71
VICTOR MC CALL (b) (6) (b) (6)	M 1	ELEVATOR MECHANIC								50.09 75.135	37.71 37.71

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
<b>ARMSTRONG,BRUCE</b>	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	273.13 N MEDINS 273.13- U MEDREI	Memo	<input type="checkbox"/>
									124.23 SS				
									29.05 MED				
												<b>3,070.35</b>	
<b>LAUGHLIN,TIMOTHY SHANE</b>	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	121.92 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED				
												<b>2,271.65</b>	
<b>DEPT TOTAL 000002</b>	80.00 REG			3,005.40 REG	.00 O/T				311.19 FIT		.00 TOTAL DEDUCTIONS	<b>2 Pays</b>	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.34 SS			<b>5,342.00</b>	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.57 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	273.13	N MEDINS	273.13- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 7 day of March 2021 and ending the 13 day of March 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	



[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	<input checked="" type="checkbox"/>
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE File: 000101 H Dept: 000090 W Dept: 000002 Rate: 50.0900 Dept: 000002 Rate: 37.7120	40.00			2,003.60									
			40.00 F			1,508.48 F		3,512.08	192.14 FIT 124.22 SS 29.05 MED	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
												3,067.49	
LAUGHLIN,TIMOTHY SHANE File: 000178 H Dept: 000099 W Dept: 000002 Rate: 25.0450 Dept: 000002 Rate: 36.7100	32.00			801.44									
			32.00 F			1,174.72 F		1,976.16	83.61 FIT 49.69 SS 11.62 MED			Memo	<input type="checkbox"/>
												1,831.24	
DEPT TOTAL 000002	72.00 REG .00 O/T .00 HOURS 3 72.00 HOURS 4			2,805.04 REG .00 EARNINGS 3 .00 EARNINGS 5		.00 O/T 2,683.20 EARNINGS 4 5,488.24 GROSS			275.75 FIT 173.91 SS 40.67 MED 99.18 STATE		.00 TOTAL DEDUCTIONS	2 Pays 4,898.73	<input type="checkbox"/>

HOURS ANALYSIS:	72.00	F	FRINGE
EARNINGS ANALYSIS:	2,683.20	F	FRINGE
STATUTORY DED. ANALYSIS:	99.18	43	IL
VOLUNTARY DED. ANALYSIS:	263.33	N	MEDINS 263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 8 day of March 2020 and ending the 14 day of March 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	273.13 N MEDINS 273.13- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.06 MED				
												3,070.35	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	121.92 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,271.64	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				311.19 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,341.99	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.59 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	273.13	N MEDINS	273.13- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 14 day of March 2021 and ending the 20 day of March 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	<input checked="" type="checkbox"/>
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE File: 000101 H Dept: 000090 W Dept: 000002 Rate: 50.0900 Dept: 000002 Rate: 37.7120	40.00			2,003.60									
			40.00 FR			1,508.48 FR							
								3,512.08	192.14 FIT 124.22 SS 29.06 MED	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
												3,067.48	
LAUGHLIN,TIMOTHY SHANE File: 000178 H Dept: 000099 W Dept: 000002 Rate: 25.0450 Dept: 000002 Rate: 36.7100	40.00			1,001.80									
			40.00 FR			1,468.40 FR							
								2,470.20	123.36 FIT 62.11 SS 14.53 MED			Memo	<input type="checkbox"/>
												2,270.20	
DEPT TOTAL 000002	80.00 REG .00 O/T .00 HOURS 3 80.00 HOURS 4			3,005.40 REG .00 EARNINGS 3 .00 EARNINGS 5	.00 O/T EARNINGS 4 GROSS				315.50 FIT 186.33 SS 43.59 MED 99.18 STATE		.00 TOTAL DEDUCTIONS	2 Pays 5,337.68	<input type="checkbox"/>

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI



I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 15 day of March 2020 and ending the 21 day of March 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	



PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	273.13 N MEDINS 273.13- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,070.36	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	121.92 FIT			Memo	<input type="checkbox"/>
									62.12 SS				
									14.53 MED				
												2,271.63	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				311.19 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.34 SS			5,341.99	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	273.13	N MEDINS	273.13- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 21 day of March 2021 and ending the 27 day of March 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.23 SS				
									29.05 MED				
												3,067.48	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.12 SS				
									14.53 MED				
												2,270.19	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.35 SS			5,337.67	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 22 day of March 2020 and ending the 28 day of March 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]



PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.06 MED				
												3,067.48	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,337.68	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.59 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 19 day of April 2020 and ending the 25 day of April 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	273.13 N MEDINS 273.13- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,070.36	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	121.92 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED				
												2,271.65	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				311.19 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,342.01	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.57 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	273.13	N MEDINS	273.13- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 28 day of March 2021 and ending the 3 day of April 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

NAME AND TITLE:  
DOREEN ROOKS  
OFFICE MANAGER

SIGNATURE:

(b) (6)

DATE:

THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,067.49	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED				
												2,270.21	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,337.70	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.57 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 29 day of March 2020 and ending the 4 day of April 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	



[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	273.13 N MEDINS 273.13- U MEDREI	Memo	<input type="checkbox"/>
									124.23 SS				
									29.05 MED				
												3,070.35	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	121.92 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,271.64	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				311.19 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.34 SS			5,341.99	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	273.13	N MEDINS	273.13- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 4 day of April 2021 and ending the 10 day of April 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,067.49	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,337.69	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 5 day of April 2020 and ending the 11 day of April 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	273.13 N MEDINS 273.13- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.06 MED				
												3,070.35	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	121.92 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED				
												2,271.65	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				311.19 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,342.00	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	273.13	N MEDINS	273.13- U MEDREI



I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 11 day of April 2021 and ending the 17 day of April 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.23 SS				
									29.05 MED				
												3,067.48	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED				
												2,270.21	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.34 SS			5,337.69	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.57 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 12 day of April 2020 and ending the 18 day of April 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.23 SS				
									29.04 MED				
												3,067.49	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED				
												2,270.21	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.34 SS			5,337.70	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.56 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 3 day of May 2020 and ending the 9 day of May 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]



PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,067.49	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.12 SS				
									14.53 MED				
												2,270.19	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.34 SS			5,337.68	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 10 day of May 2020 and ending the 16 day of May 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	



PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	273.13 N MEDINS 273.13- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,070.36	
DEPT TOTAL	40.00 REG			2,003.60 REG	.00 O/T				189.27 FIT				1 Pays <input type="checkbox"/>
000002	.00 O/T			.00 EARNINGS 3		1,508.48 EARNINGS 4			124.22 SS		.00 TOTAL DEDUCTIONS		3,070.36
	.00 HOURS 3			.00 EARNINGS 5		3,512.08 GROSS			29.05 MED				
	40.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	40.00	FR	Fringe
EARNINGS ANALYSIS:	1,508.48	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	273.13	N MEDINS	273.13- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 25 day of April 2021 and ending the 1 day of May 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,067.49	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,337.69	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 26 day of April 2020 and ending the 2 day of May 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	



Project/Location: GSA MELVIN PRICE FED COURTHOUSE- EAST ST LOUIS, MO	Contract No.:	47PF0019C0092
Payroll No.	63	For work performed F 7/2/04

63

For week ending: 5/8/21

47PF0019C0092

[illegible]







I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA-MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 2 day of May 2021 and ending the 8 day of May 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967, 76 Stat. 357, 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

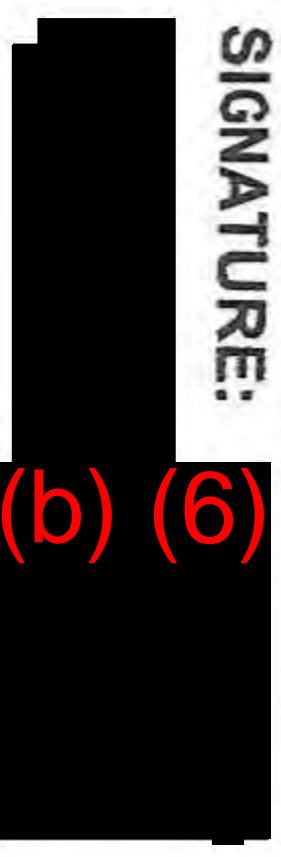
In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b>  (b) (6) <b>DATE:</b>
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	



[illegible]



## PERSONNEL

## HOURS

Reg	O/T	Hours	384
40.00			

**EARNINGS**

Reg	Off Earnings	38.4 Earnings	5
2,003.60			

## GROSS

## STATUTORY DEDUCTIONS

Federal State/Local

## VOLUNTARY DEDUCTIONS

## NET PAY

## ANALYSIS

Dept: 000002

Rate: 50.0900

Dept: 000002	40.00 FR
--------------	----------

Rate: 37.7120

1,508.48 FR

3,512.08

189.27 FIT	99.18 IL 43 S2
124.22 SS	
29.05 MED	

Memo ☐

DEPT TOTAL  
000002

40.00	REG
.00	O/T
.00	HOURS 3
40.00	HOURS 4

2,003.60	REG
.00	EARN
.00	EARN

1,508.48	EARNINGS 4
3,512.08	GROSS
.00	O/T

189.27	FIT
124.22	SS
29.05	MED
99.18	STATE

.00 TOTAL DEDUCTIONS

1 Pays ☐  
3,070.36

HOURS ANALYSIS:

## EARNINGS ANALYSIS:

STATUTORY DED. ANALYSIS:

**VOLUNTARY DED. ANALYSIS:**

40.00	FR	Fringe
-------	----	--------

1,508.48	FR	Fringe
----------	----	--------

99.18 43 IL

273.13 N MEDINS

273,13- U MEDREI



## Labor Distribution

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# ARMSTRONG ELEVATOR

Company Code: **GTB**

Batch : 0625-030

Period Ending : 05/15/2021

Week 20

Service Center : 030

Pay Date : 05/19/2021

Page 1



I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 9 day of May 2021 and ending the 15 day of May 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

NAME AND TITLE:  
DOREEN ROOKS  
OFFICE MANAGER

SIGNATURE:

(b) (6)

DATE:

THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.



[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	189.27 FIT	99.18 IL 43 S2	273.13 N MEDINS 273.13- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,070.36	
DEPT TOTAL	40.00 REG			2,003.60 REG	.00 O/T				189.27 FIT				1 Pays <input type="checkbox"/>
000002	.00 O/T			.00 EARNINGS 3		1,508.48 EARNINGS 4			124.22 SS		.00 TOTAL DEDUCTIONS		3,070.36
	.00 HOURS 3			.00 EARNINGS 5		3,512.08 GROSS			29.05 MED				
	40.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	40.00	FR	Fringe
EARNINGS ANALYSIS:	1,508.48	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	273.13	N MEDINS	273.13- U MEDREI



I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 16 day of May 2021 and ending the 22 day of May 2021, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.06 MED				
												3,067.48	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,337.68	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.59 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 17 day of May 2020 and ending the 23 day of May 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	32.00		8.00 H	1,602.88		400.72 H							
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.23 SS				
									29.05 MED				
												3,067.48	
LAUGHLIN,TIMOTHY SHANE	32.00		8.00 H	801.44		200.36 H							
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED				
												2,270.21	
DEPT TOTAL 000002	64.00 REG			2,404.32 REG			.00 O/T		315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			601.08 EARNINGS 3		2,976.88 EARNINGS 4			186.34 SS			5,337.69	
	16.00 HOURS 3			.00 EARNINGS 5		5,982.28 GROSS			43.57 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	16.00	H	HOL	80.00	FR	Fringe	
EARNINGS ANALYSIS:	601.08	H	HOL	2,976.88	FR	Fringe	
STATUTORY DED. ANALYSIS:	99.18	43	IL				
VOLUNTARY DED. ANALYSIS:	263.33	N	MEDINS	263.33-	U	MEDREI	

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 24 day of May 2020 and ending the 30 day of May 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]



PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,067.49	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,337.69	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 31 day of May 2020 and ending the 6 day of June 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,067.49	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED				
												2,270.21	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,337.70	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.57 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 7 day of June 2020 and ending the 13 day of June 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.23 SS				
									29.05 MED				
												3,067.48	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.34 SS			5,337.68	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 14 day of June 2020 and ending the 20 day of June 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	



[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.06 MED				
												3,067.48	
LAUGHLIN,TIMOTHY SHANE	16.00			400.72									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			16.00 FR			587.36 FR							
Rate: 36.7100								988.08	35.52 FIT			Memo	<input type="checkbox"/>
									24.85 SS				
									5.81 MED				
												921.90	
DEPT TOTAL 000002	56.00 REG			2,404.32 REG	.00 O/T				227.66 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,095.84 EARNINGS 4				149.07 SS			3,989.38	
	.00 HOURS 3			.00 EARNINGS 5	4,500.16 GROSS				34.87 MED				
	56.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	56.00	FR	Fringe
EARNINGS ANALYSIS:	2,095.84	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 21 day of June 2020 and ending the 27 day of June 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	32.00		8.00 H	1,602.88		400.72 H							
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,067.49	
LAUGHLIN,TIMOTHY SHANE	32.00		8.00 H	801.44		200.36 H							
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT		185.00 L MISC	Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,085.20	
DEPT TOTAL 000002	64.00 REG			2,404.32 REG			.00 O/T		315.50 FIT		185.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			601.08 EARNINGS 3		2,976.88 EARNINGS 4			186.33 SS			5,152.69	
	16.00 HOURS 3			.00 EARNINGS 5		5,982.28 GROSS			43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	16.00	H	HOL	80.00	FR	Fringe							
EARNINGS ANALYSIS:	601.08	H	HOL	2,976.88	FR	Fringe							
STATUTORY DED. ANALYSIS:	99.18	43	IL										
VOLUNTARY DED. ANALYSIS:	185.00	L	MISC	263.33	N	MEDINS			263.33-	U	MEDREI		

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 21 day of June 2020 and ending the 27 day of June 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.23 SS				
									29.05 MED				
												3,067.48	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED				
												2,270.21	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.34 SS			5,337.69	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.57 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI



I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 5 day of July 2020 and ending the 11 day of June 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,067.49	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,337.69	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 12 day of July 2020 and ending the 18 day of June 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.06 MED				
												3,067.48	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.12 SS				
									14.52 MED				
												2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.34 SS			5,337.68	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 19 day of July 2020 and ending the 25 day of June 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]



PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	<input checked="" type="checkbox"/>
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.23 SS				
									29.05 MED				
												3,067.48	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.34 SS			5,337.68	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 26 day of July 2020 and ending the 1 day of August 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,067.49	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,337.69	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 2 day of August 2020 and ending the 8 day of August 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED			3,067.49	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED			2,270.21	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,337.70	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.57 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 9 day of August 2020 and ending the 15 day of August 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	



[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT				
									62.11 SS				
									14.53 MED				
												2,270.20	
DEPT TOTAL 000002	40.00 REG			1,001.80 REG	.00 O/T				123.36 FIT				
	.00 O/T			.00 EARNINGS 3		1,468.40 EARNINGS 4			62.11 SS				
	.00 HOURS 3			.00 EARNINGS 5		2,470.20 GROSS			14.53 MED				
	40.00 HOURS 4										.00 TOTAL DEDUCTIONS		
												1 Pays	
												2,270.20	

HOURS ANALYSIS:	40.00	FR	Fringe
EARNINGS ANALYSIS:	1,468.40	FR	Fringe

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 16 day of August 2020 and ending the 22 day of August 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.23 SS				
									29.05 MED				
												3,067.48	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.34 SS			5,337.68	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 23 day of August 2020 and ending the 29 day of August 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.23 SS				
									29.05 MED				
												3,067.48	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.34 SS			5,337.68	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI



I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 20 day of September 2020 and ending the 26 day of September 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.06 MED				
												3,067.48	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.12 SS				
									14.52 MED				
												2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.34 SS			5,337.68	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 30 day of August 2020 and ending the 6 day of September 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	32.00		8.00 H	1,602.88		400.72 H							
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,067.49	
LAUGHLIN,TIMOTHY SHANE	32.00		8.00 H	801.44		200.36 H							
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,270.20	
DEPT TOTAL 000002	64.00 REG			2,404.32 REG			.00 O/T		315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			601.08 EARNINGS 3		2,976.88 EARNINGS 4			186.33 SS			5,337.69	
	16.00 HOURS 3			.00 EARNINGS 5		5,982.28 GROSS			43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	16.00	H	HOL	80.00	FR	Fringe	
EARNINGS ANALYSIS:	601.08	H	HOL	2,976.88	FR	Fringe	
STATUTORY DED. ANALYSIS:	99.18	43	IL				
VOLUNTARY DED. ANALYSIS:	263.33	N	MEDINS	263.33-	U	MEDREI	

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 6 day of September 2020 and ending the 12 day of September 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]



PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED			3,067.49	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED			2,270.21	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,337.70	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.57 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 13 day of September 2020 and ending the 19 day of September 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.06 MED				
												3,067.48	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,337.68	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.59 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 27 day of September 2020 and ending the 3 day of October 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

Project/Location: GSA MELVIN PRICE FED COURTHOUSE- EAST ST LOUIS, MO										Contract No.: 47PF0019C0092	
Payroll No. 34		For week ending: 10/17/20									
			Day and Date								
Name, Address	Tax/ Dep	Work Classification	S	M	T	W	T	F	S	Rate	Fringe
			11	12	13	14	15	16	17		
Bruce Armstrong (b) (6) (b) (6)	M 0	ELEVATOR MECHANIC		8	8	8	8	8		50.09 75.135	37.71 37.71
TIMOTHY LAUGHLIN (b) (6)	S 0	MECHANIC APPRENTICE		8	8	8	8	8		25.05 37.568	36.71 36.71
VICTOR MC CALL (b) (6) (b) (6)	M 1	ELEVATOR MECHANIC						8		50.09 75.135	37.71 37.71

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	<input checked="" type="checkbox"/>
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
<b>ARMSTRONG,BRUCE</b> File: 000101 Dept: 000002 Rate: 50.0900 Dept: 000002 Rate: 37.7120	40.00			2,003.60									
			40.00 FR	1,508.48	FR			3,512.08	192.14 FIT 124.23 SS 29.05 MED	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo <input type="checkbox"/>	
												3,067.48	
<b>LAUGHLIN,TIMOTHY SHANE</b> File: 000178 Dept: 000002 Rate: 25.0450 Dept: 000002 Rate: 36.7100	40.00			1,001.80									
			40.00 FR	1,468.40	FR			2,470.20	123.36 FIT 62.11 SS 14.53 MED			Memo <input type="checkbox"/>	
												2,270.20	
<b>MCCALL,VICTOR S</b> File: 000188 H Dept: 000098 W Dept: 000002 Rate: 50.0900 Dept: 000002 Rate: 37.7120	8.00			400.72									
			8.00 FR	301.70	FR			702.42	25.60 FIT 24.85 SS 5.81 MED			Memo <input type="checkbox"/>	
												646.16	
<b>DEPT TOTAL 000002</b>	88.00 REG .00 O/T .00 HOURS 3 88.00 HOURS 4			3,406.12 REG .00 EARNINGS 3 .00 EARNINGS 5	.00 O/T EARNINGS 4 GROSS			3,278.58 6,684.70	341.10 FIT 211.19 SS 49.39 MED 99.18 STATE		.00 TOTAL DEDUCTIONS	3 Pays <input type="checkbox"/> 5,983.84	

HOURS ANALYSIS:	88.00	FR	Fringe
EARNINGS ANALYSIS:	3,278.58	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 11 day of October 2020 and ending the 17 day of October 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	



[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
<b>ARMSTRONG,BRUCE</b> File: 000101 Dept: 000002 Rate: 50.0900	40.00			2,003.60									
Dept: 000002 Rate: 37.7120			40.00 FR			1,508.48 FR							
								3,512.08	192.14 FIT 124.22 SS 29.05 MED	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
												<b>3,067.49</b>	
<b>LAUGHLIN,TIMOTHY SHANE</b> File: 000178 Dept: 000002 Rate: 25.0450	40.00			1,001.80									
Dept: 000002 Rate: 36.7100			40.00 FR			1,468.40 FR							
								2,470.20	123.36 FIT 62.12 SS 14.52 MED			Memo	<input type="checkbox"/>
												<b>2,270.20</b>	
<b>MCCALL,VICTOR S</b> File: 000188 Dept: 000002 Rate: 35.0600	40.00			1,402.40									
Dept: 000002 Rate: 37.7120			40.00 FR			1,508.48 FR							
								2,910.88	193.30 FIT 86.95 SS 20.33 MED			Memo	<input type="checkbox"/>
												<b>2,610.30</b>	
<b>DEPT TOTAL 000002</b>	120.00 REG .00 O/T .00 HOURS 3 120.00 HOURS 4			4,407.80 REG .00 EARNINGS 3 .00 EARNINGS 5	.00 O/T EARNINGS 4 GROSS				508.80 FIT 273.29 SS 63.90 MED 99.18 STATE		.00 TOTAL DEDUCTIONS	<b>3 Pays</b>	<input type="checkbox"/>
												<b>7,947.99</b>	

HOURS ANALYSIS:	120.00	FR	Fringe
EARNINGS ANALYSIS:	4,485.36	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 18 day of October 2020 and ending the 24 day of October 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

Project/Location: GSA MELVIN PRICE FED COURTHOUSE- EAST ST LOUIS, MO										Contract No.: 47PF0019C0092	
Payroll No. 36		For week ending: 10/31/20									
			Day and Date								
Name, Address	Tax/ Dep	Work Classification	S	M	T	W	T	F	S	Rate	Fringe
			25	26	27	28	29	30	31		
Bruce Armstrong	M	ELEVATOR		8	8	8	8	8		50.09	37.71
(b) (6)	0	MECHANIC								75.135	37.71
(b) (6)											
TIMOTHY LAUGHLIN	S	MECHANIC		8	8	8	8	8		25.05	36.71
(b) (6)	0	APPRENTICE								37.568	36.71
VICTOR MC CALL	M	ELEVATOR		8	8	8	8			50.09	37.71
(b) (6)	1	MECHANIC								75.135	37.71
(b) (6)											

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	<input checked="" type="checkbox"/>
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
<b>ARMSTRONG,BRUCE</b> File: 000101 Dept: 000002 Rate: 50.0900	40.00			2,003.60									
Dept: 000002 Rate: 37.7120			40.00 FR			1,508.48 FR							
								3,512.08	192.14 FIT 124.22 SS 29.05 MED	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo <input type="checkbox"/>	
												3,067.49	
<b>LAUGHLIN,TIMOTHY SHANE</b> File: 000178 Dept: 000002 Rate: 25.0450	40.00			1,001.80									
Dept: 000002 Rate: 36.7100			40.00 FR			1,468.40 FR							
								2,470.20	123.36 FIT 62.11 SS 14.53 MED			Memo <input type="checkbox"/>	
												2,270.20	
<b>MCCALL,VICTOR S</b> File: 000188 Dept: 000002 Rate: 50.0900				601.20									
								601.20	49.65 FIT 37.27 SS 8.72 MED			Memo Void <input type="checkbox"/>	
												505.56	
Dept: 000002 Rate: 50.0900	32.00			1,602.88									
Dept: 000002 Rate: 37.7120			32.00 FR			1,206.78 FR							
								2,809.66	237.41 FIT 99.38 SS 23.24 MED			Memo Pay 2 <input type="checkbox"/>	
												2,449.63	
<b>DEPT TOTAL 000002</b>	112.00 REG .00 O/T .00 HOURS 3 112.00 HOURS 4			5,209.48 REG .00 EARNINGS 3 .00 EARNINGS 5		.00 O/T 4,183.66 EARNINGS 4 9,393.14 GROSS			602.56 FIT 322.98 SS 75.54 MED 99.18 STATE		.00 TOTAL DEDUCTIONS	3 Pays <input type="checkbox"/>	8,292.88

HOURS ANALYSIS:	112.00 FR Fringe		
EARNINGS ANALYSIS:	4,183.66 FR Fringe		
STATUTORY DED. ANALYSIS:	99.18 43 IL		
VOLUNTARY DED. ANALYSIS:	263.33 N MEDINS	263.33- U MEDREI	

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 25 day of October 2020 and ending the 31 day of October 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,067.49	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED				
												2,270.21	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,337.70	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.57 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI



I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 4 day of October 2020 and ending the 10 day of October 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6) <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	



PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	<input checked="" type="checkbox"/>
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.23 SS				
									29.06 MED			3,067.47	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED			2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.34 SS			5,337.67	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.59 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 1 day of November 2020 and ending the 7 day of November 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS				EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4		Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
LAUGHLIN,TIMOTHY SHANE	32.00		8.00 H		801.44		200.36 H							
File: 000178														
Dept: 000002														
Rate: 25.0450														
Dept: 000002			40.00 FR				1,468.40 FR							
Rate: 36.7100									2,470.20	123.36 FIT				Memo <input type="checkbox"/>
										62.11 SS				
										14.52 MED				
													2,270.21	
DEPT TOTAL 000002	32.00 REG				801.44 REG		.00 O/T			123.36 FIT			.00 TOTAL DEDUCTIONS	1 Pays <input type="checkbox"/>
	.00 O/T				200.36 EARNINGS 3		1,468.40 EARNINGS 4			62.11 SS				2,270.21
	8.00 HOURS 3				.00 EARNINGS 5		2,470.20 GROSS			14.52 MED				
	40.00 HOURS 4													

HOURS ANALYSIS:	8.00	H	HOL	40.00	FR	Fringe	
EARNINGS ANALYSIS:	200.36	H	HOL	1,468.40	FR	Fringe	

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 8 day of November 2020 and ending the 14 day of November 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]



PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,067.49	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED				
												2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,337.69	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 15 day of November 2020 and ending the 21 day of November 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	24.00		16.00 H	1,202.16		801.44	H						
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48	FR						
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				
												3,067.49	
LAUGHLIN,TIMOTHY SHANE	24.00		16.00 H	601.08		400.72	H						
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40	FR						
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED				
												2,270.21	
DEPT TOTAL 000002	48.00 REG			1,803.24 REG			.00 O/T		315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			1,202.16 EARNINGS 3		2,976.88	EARNINGS 4		186.33 SS			5,337.70	
	32.00 HOURS 3			.00 EARNINGS 5		5,982.28	GROSS		43.57 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	32.00	H	HOL	80.00	FR	Fringe	
EARNINGS ANALYSIS:	1,202.16	H	HOL	2,976.88	FR	Fringe	
STATUTORY DED. ANALYSIS:	99.18	43	IL				
VOLUNTARY DED. ANALYSIS:	263.33	N	MEDINS	263.33-	U	MEDREI	

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 22 day of November 2020 and ending the 28 day of November 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

[illegible]

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.06 MED			3,067.48	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.53 MED			2,270.20	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,337.68	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.59 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 6 day of December 2020 and ending the 12 day of December 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	





PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.22 SS				
									29.05 MED				3,067.49
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.11 SS				
									14.52 MED				2,270.21
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.33 SS			5,337.70	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.57 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 13 day of December 2020 and ending the 19 day of December 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	

Project/Location: GSA MELVIN PRICE FED COURTHOUSE- EAST ST LOUIS, MO										Contract No.: 47PF0019C0092	
Payroll No. 41		For week ending: 12/5/20									
			Day and Date								
Name, Address	Tax/ Dep	Work Classification	S	M	T	W	T	F	S	Rate	Fringe
			29	30	1	2	3	4	5		
Bruce Armstrong	M	ELEVATOR		8	8	8	8	8		50.09	37.71
(b) (6)	0	MECHANIC								75.135	37.71
(b) (6)											
TIMOTHY LAUGHLIN	S	MECHANIC		8	8	8	8	8		25.05	36.71
(b) (6)	0	APPRENTICE								37.568	36.71
VICTOR MC CALL	M	ELEVATOR								50.09	37.71
(b) (6)	1	MECHANIC								75.135	37.71
(b) (6)											

PERSONNEL	HOURS			EARNINGS				GROSS	STATUTORY DEDUCTIONS		VOLUNTARY DEDUCTIONS	NET PAY	✓
	Reg	O/T	Hours 3&4	Reg	O/T	Earnings 3&4	Earnings 5		Federal	State/Local			
ARMSTRONG,BRUCE	40.00			2,003.60									
File: 000101													
Dept: 000002													
Rate: 50.0900													
Dept: 000002			40.00 FR			1,508.48 FR							
Rate: 37.7120								3,512.08	192.14 FIT	99.18 IL 43 S2	263.33 N MEDINS 263.33- U MEDREI	Memo	<input type="checkbox"/>
									124.23 SS				
									29.05 MED				
												3,067.48	
LAUGHLIN,TIMOTHY SHANE	40.00			1,001.80									
File: 000178													
Dept: 000002													
Rate: 25.0450													
Dept: 000002			40.00 FR			1,468.40 FR							
Rate: 36.7100								2,470.20	123.36 FIT			Memo	<input type="checkbox"/>
									62.12 SS				
									14.53 MED				
												2,270.19	
DEPT TOTAL 000002	80.00 REG			3,005.40 REG	.00 O/T				315.50 FIT		.00 TOTAL DEDUCTIONS	2 Pays	<input type="checkbox"/>
	.00 O/T			.00 EARNINGS 3	2,976.88 EARNINGS 4				186.35 SS			5,337.67	
	.00 HOURS 3			.00 EARNINGS 5	5,982.28 GROSS				43.58 MED				
	80.00 HOURS 4								99.18 STATE				

HOURS ANALYSIS:	80.00	FR	Fringe
EARNINGS ANALYSIS:	2,976.88	FR	Fringe
STATUTORY DED. ANALYSIS:	99.18	43 IL	
VOLUNTARY DED. ANALYSIS:	263.33	N MEDINS	263.33- U MEDREI

I, DOREEN ROOKS OFFICE MANAGER  
(Name of signatory party) (Title)

Do hereby state:

(1) That I pay or supervise the payment of the persons employed by Armstrong Elevator Company at GSA- MELVIN PRICE FEDERAL COURTHOUSE (Contractor or Subcontractor) (Building or work) that during the payroll period commencing on the 29 day of November 2020 and ending the 5 day of December 2020, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Armstrong Elevator Company from the full weekly (Contractor or subcontractor) wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 CFR Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), and described below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed.

In the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4 (c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☒ X Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4 (c) below.

(c) EXCEPTIONS

EXCEPTION(CRAFT)	EXPLANATION
REMARKS	

<b>NAME AND TITLE:</b> DOREEN ROOKS OFFICE MANAGER	<b>SIGNATURE:</b> (b) (6)  <b>DATE:</b>
THE WILFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.	



MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS  
**CONTRACTOR PAYROLL RECORDS**  
 (See Sections 290.210 to 290.340, RSMo and 8 CSR 30-3.010 to 8 CSR 30-3.060)

Name of <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Subcontractor Wellington Environmental				Address of Contractor or Subcontractor: 607 Hanley Industrial Court City: St Louis State: MO ZIP: 63144 Phone Number: ( 314 ) 644 - 4930											
Name of Public Body Armstrong Elevator - Melvin Price Federal Blding				Address of Public Body: 750 Missouri Ave City: East St Louis State: IL ZIP: 62201 Phone Number: ( 727 ) 323 - 3800											
Payroll No. 1 -REVISED	For Week Ending 01 / 17 / 2021	AWO	Project and Location Melvin Price Federal Building, East St Louis, IL 62201										Project or Contract No. Elevator Shaft #4		

1. Name and Address of Employee	2. Occupational Title ***	3. Day and Date							4. Total Hours	5. Hourly Rate	6. Gross Amt Project / Week	7. Deductions					8. Net Wages Paid for Week	
		Day	M	Tu	W	Th	F	Sa				Su	FICA and Medicare	Federal and State Withholding Tax	Other A	Other B		Total Deductions
		Date	11	12	13	14	15	16				17						
		Hours Worked Each Day																
William Delay (b) (6)	Laborer (Building): General	DT										1,458.80						
		OT											111.59	94.93	88.16	68.00	362.68	\$ 1,096.12
		ST	8.00	8.00	8.00	8.00	8.00			40.00	36.47	1,458.80						
Michael Alvey (b) (6)	Laborer (Building): General	DT										1,167.04						
		OT											89.28	163.99	69.97		323.24	\$ 843.80
		ST	8.00		8.00	8.00	8.00			32.00	36.47	1,167.04						
Raymond Richardson (b) (6)	Laborer (Building): General	DT										1,422.33						
		OT											108.81	45.00	85.27	126.34	365.42	\$ 1,056.91
		ST	8.00	7.00	8.00	8.00	8.00			39.00	36.47	1,422.33						
Ronald Edsall (b) (6)	Laborer (Building): General	DT										291.76						
		OT											66.50	31.91	28.51	78.32	205.24	\$ 598.52
		ST		8.00						8.00	36.47	803.76						
Jeffrey Cress (b) (6)	Laborer (Building): General	DT										182.35						
		OT											125.80	198.40	102.10	164.52	590.82	\$ 1,053.53
		ST		5.00						5.00	36.47	1,644.35						
		DT																
		OT																
		ST																
		DT																
		OT																
		ST																

\*\*\* If a worker performs work in more than one occupational title, you must separately list the hours worked per occupational title and wage rates. \*\*\*

# FRINGE BENEFITS

In addition to the basic rates paid to each laborer or mechanic on the payroll, payments have been or will be made to appropriate programs for the benefit of these employees as shown in the following chart below. If fringe benefit amounts paid are the same for all employees, you may list the amount of each such identical fringe payment only once in the appropriate column; if the fringe benefit amounts vary by employee, list each employee's name and set out the amounts paid on behalf of each employee for each fringe benefit.

Employee Name	Health and Welfare (\$/hr)	Pension (\$/hr)	Vacation (\$/hr)	Holiday (\$/hr)	Apprentice Training (\$/hr)	Other C (\$/hr)	Other D (\$/hr)	Total (\$/hr)	If "Other/Deduction" or Fringes, please explain. (Indicate Other A, B, C or D)	Identify by name, the plan, fund, or programs to which fringe benefits are paid. (Indicate H&W, Pension, etc.)
William Delay	8.25	7.00	1.00		0.45	0.37	0.20	\$17.27	A - Local Union 42 B - Misc	Local 42 - Laborers Union
Michael Alvey									A - Local Union 42	Local 42 - Laborers Union
Raymon Richardson									A - Local Union 42 B - Child Support/401K	Local 42 - Laborers Union
Ronald Edsall									A - Local Union 42 B- 401K	Local 42 - Laborers Union
Jeffrey Cress									A - Local Union 42 B- 401K	Local 42 - Laborers Union



Date: 03/10/21

I, Stella Benson (Name of Signatory Party), Accounting Manager (Title) do hereby state:

(1) That I pay or supervise the payment of the persons employed by Wellington Environmental (Contractor or Subcontractor) on the Armstrong Elevator-Melvin Price Federal Bldg (Building or Work); that during the payroll period commencing seven (7) days prior to the week ending date of 01/17/2021 all persons employed on said project have been paid the full weekly wages stated above, that no rebates have been or will be made either directly or indirectly to or on behalf of Wellington Environmental (Contractor or Subcontractor), from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than legally permissible deductions, that full and accurate records clearly indicating the names, occupations, and crafts of every worker employed by them in connection with the public work together with an accurate record of the number of hours worked by each worker and the actual wages paid for each class or type of work performed and deduction made for each worker have been prepared, that these payroll records are kept and have been provided for inspection to the authorized representative of the contracting public body and will be available as often as may be necessary and such records shall not be destroyed or removed from the state for the period of one year following the completion of the public work in connection with which the records are made.

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage order incorporated into the contract; that the occupational title set forth herein for each laborer or mechanic conform with the work performed.

Name and Title Stella Benson, Accounting Manager	Signature (b) (6)
The falsification of any of the above statements may subject the contractor or subcontractor to criminal prosecution. See Sections 290.340, 570.090, 575.050	

Missouri Department of Labor and Industrial Relations is an equal opportunity employer/program.  
TDD/TTY: 800-735-2966 Relay Missouri: 711



MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS  
**CONTRACTOR PAYROLL RECORDS**  
 (See Sections 290.210 to 290.340, RSMo and 8 CSR 30-3.010 to 8 CSR 30-3.060)

Name of <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Subcontractor Wellington Environmental				Address of Contractor or Subcontractor: 607 Hanley Industrial Court City: St Louis State: MO ZIP: 63144 Phone Number: ( 314 ) 644 - 4930											
Name of Public Body Armstrong Elevator - Melvin Price Federal Blding				Address of Public Body: 750 Missouri Ave City: East St Louis State: IL ZIP: 62201 Phone Number: ( 727 ) 323 - 3800											
Payroll No. 2 -REVISED	For Week Ending 01 / 24 / 2021	AWO	Project and Location Melvin Price Federal Building, East St Louis, IL 62201										Project or Contract No. Elevator Shaft #4		

1. Name and Address of Employee	2. Occupational Title ***	3. Day and Date							4. Total Hours	5. Hourly Rate	6. Gross Amt Project / Week	7. Deductions					8. Net Wages Paid for Week						
		Day	M	Tu	W	Th	F	Sa				Su	FICA and Medicare	Federal and State Withholding Tax	Other A	Other B		Total Deductions					
		Date	18	19	20	21	22	23				24											
		Hours Worked Each Day																					
William Delay (b) (6)	Laborer (Building): General	DT															1,167.04	89.28	50.47	70.53		210.28	\$ 956.76
		OT																					
		ST	8.00		8.00	8.00	8.00										1,167.04						
Michael Alvey (b) (6)	Laborer (Building): General	DT															1,458.80	111.59	238.65	87.46		437.70	\$ 1,021.10
		OT																					
		ST	8.00	8.00	8.00	8.00	8.00										1,458.80						
Raymond Richardson (b) (6)	Laborer (Building): General	DT															1,221.75	93.45	144.49	73.25	117.01	428.20	\$ 793.55
		OT																					
		ST	5.50	4.00	8.00	8.00	8.00										1,221.75						
Ronald Edsall (b) (6)	Laborer (Building): General	DT															291.76	70.16	45.69	17.63	83.52	217.00	\$ 634.76
		OT																					
		ST		8.00													851.76						
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		ST																					
		DT																					
		OT																					
		ST																					

\*\*\* If a worker performs work in more than one occupational title, you must separately list the hours worked per occupational title and wage rates. \*\*\*

# FRINGE BENEFITS

In addition to the basic rates paid to each laborer or mechanic on the payroll, payments have been or will be made to appropriate programs for the benefit of these employees as shown in the following chart below. If fringe benefit amounts paid are the same for all employees, you may list the amount of each such identical fringe payment only once in the appropriate column; if the fringe benefit amounts vary by employee, list each employee's name and set out the amounts paid on behalf of each employee for each fringe benefit.

Employee Name	Health and Welfare (\$/hr)	Pension (\$/hr)	Vacation (\$/hr)	Holiday (\$/hr)	Apprentice Training (\$/hr)	Other C (\$/hr)	Other D (\$/hr)	Total (\$/hr)	If "Other/Deduction" or Fringes, please explain. (Indicate Other A, B, C or D)	Identify by name, the plan, fund, or programs to which fringe benefits are paid. (Indicate H&W, Pension, etc.)
William Delay	8.25	7.00	1.00		0.45	0.37	0.20	\$17.27	A - Local Union 42	Local 42 - Laborers Union
Michael Alvey									A - Local Union 42	Local 42 - Laborers Union
Raymon Richardson									A - Local Union 42 B - Child Support/401K	Local 42 - Laborers Union
Ronald Edsall									A - Local Union 42 B- 401K	Local 42 - Laborers Union

Date: 03/10/2021

I, Stella Benson (Name of Signatory Party), Accounting Manager (Title) do hereby state:

(b) (6)

(1) That I pay or supervise the payment of the persons employed by Wellington Environmental (Contractor or Subcontractor) on the Armstrong Elevator-Melvin Price Federal Bldg (Building or Work); that during the payroll period commencing seven (7) days prior to the week ending date of 01/24/2021 all persons employed on said project have been paid the full weekly wages stated above, that no rebates have been or will be made either directly or indirectly to or on behalf of Wellington Environmental (Contractor or Subcontractor), from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than legally permissible deductions, that full and accurate records clearly indicating the names, occupations, and crafts of every worker employed by them in connection with the public work together with an accurate record of the number of hours worked by each worker and the actual wages paid for each class or type of work performed and deduction made for each worker have been prepared, that these payroll records are kept and have been provided for inspection to the authorized representative of the contracting public body and will be available as often as may be necessary and such records shall not be destroyed or removed from the state for the period of one year following the completion of the public work in connection with which the records are made.

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage order incorporated into the contract; that the occupational title set forth herein for each laborer or mechanic conform with the work performed.

Name and Title	Signature
Stella Benson, Accounting Manager	(b) (6)
The falsification of any of the above statements may subject the contractor or subcontractor to criminal prosecution. See Sections 290.340, 570.090, 575.050	

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TDD/TTY: 800-735-2966 Relay Missouri: 711





MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS  
**CONTRACTOR PAYROLL RECORDS**  
 (See Sections 290.210 to 290.340, RSMo and 8 CSR 30-3.010 to 8 CSR 30-3.060)

Name of <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Subcontractor Wellington Environmental				Address of Contractor or Subcontractor: 607 Hanley Industrial Court City: St Louis State: MO ZIP: 63144 Phone Number: ( 314 ) 644 - 4930											
Name of Public Body Armstrong Elevator - Melvin Price Federal Blding				Address of Public Body: 750 Missouri Ave City: East St Louis State: IL ZIP: 62201 Phone Number: ( 727 ) 323 - 3800											
Payroll No. 3-REVISED	For Week Ending 01 / 31 / 2021	AWO	Project and Location Melvin Price Federal Building, East St Louis, IL 62201										Project or Contract No. Elevator Shaft #4		

1. Name and Address of Employee	2. Occupational Title ***	3. Day and Date							4. Total Hours	5. Hourly Rate	6. Gross Amt Project / Week	7. Deductions					8. Net Wages Paid for Week							
		Day	M	T	W	Th	F	Sa				Su	FICA and Medicare	Federal and State Withholding Tax	Other A	Other B		Total Deductions						
		Date	25	26	27	28	29	30			31													
		Hours Worked Each Day																						
William Delay (b) (6)	Laborer (Building): General	DT										1,458.80	111.60	94.93	88.16		294.69	\$ 1,164.11						
		OT																						
		ST	8.00	8.00	8.00	8.00	8.00			40.00	36.47								1,458.80					
Michael Alvey (b) (6)	Laborer (Building): General	DT										1,458.80	111.59	238.65	87.46		437.70	\$ 1,021.10						
		OT																						
		ST	8.00	8.00	8.00	8.00	8.00			40.00	36.47								1,458.80					
Raymond Richardson (b) (6)	Laborer (Building): General	DT										1,458.80	111.61	201.55	87.46	128.03	528.65	\$ 930.15						
		OT																						
		ST	8.00	8.00	8.00	8.00	8.00			40.00	36.47								1,458.80					
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\*\*\* If a worker performs work in more than one occupational title, you must separately list the hours worked per occupational title and wage rates. \*\*\*

# FRINGE BENEFITS

In addition to the basic rates paid to each laborer or mechanic on the payroll, payments have been or will be made to appropriate programs for the benefit of these employees as shown in the following chart below. If fringe benefit amounts paid are the same for all employees, you may list the amount of each such identical fringe payment only once in the appropriate column; if the fringe benefit amounts vary by employee, list each employee's name and set out the amounts paid on behalf of each employee for each fringe benefit.

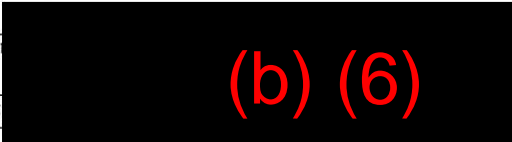
Employee Name	Health and Welfare (\$/hr)	Pension (\$/hr)	Vacation (\$/hr)	Holiday (\$/hr)	Apprentice Training (\$/hr)	Other C (\$/hr)	Other D (\$/hr)	Total (\$/hr)	If "Other/Deduction" or Fringes, please explain. (Indicate Other A, B, C or D)	Identify by name, the plan, fund, or programs to which fringe benefits are paid. (Indicate H&W, Pension, etc.)
William Delay	8.25	7.00	1.00		0.45	0.37	0.20	\$17.27	A - Local Union 42	Local 42 - Laborers Union
Michael Alvey									A - Local Union 42	Local 42 - Laborers Union
Raymond Richardson									A - Local Union 42 B - Child Support/401K	Local 42 - Laborers Union

Date: 03/10/2021

I, Stella Benson (Name of Signatory Party), Accounting Manager (Title) (b) (6) state:

(1) That I pay or supervise the payment of the persons employed by Wellington Environmental (Contractor or Subcontractor) on the Armstrong Elevator-Melvin Price Federal Bldg (Building or Work); that during the payroll period commencing seven (7) days prior to the week ending date of 01/31/2021 all persons employed on said project have been paid the full weekly wages stated above, that no rebates have been or will be made either directly or indirectly to or on behalf of Wellington Environmental (Contractor or Subcontractor), from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than legally permissible deductions, that full and accurate records clearly indicating the names, occupations, and crafts of every worker employed by them in connection with the public work together with an accurate record of the number of hours worked by each worker and the actual wages paid for each class or type of work performed and deduction made for each worker have been prepared, that these payroll records are kept and have been provided for inspection to the authorized representative of the contracting public body and will be available as often as may be necessary and such records shall not be destroyed or removed from the state for the period of one year following the completion of the public work in connection with which the records are made.

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage order incorporated into the contract; that the occupational title set forth herein for each laborer or mechanic conform with the work performed.

Name and Title	Signature
Stella Benson, Accounting Manager	
The falsification of any of the above statements may subject the contractor or subcontractor to criminal prosecution. See Sections 290.340, 570.090, 5	

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MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS  
**CONTRACTOR PAYROLL RECORDS**  
 (See Sections 290.210 to 290.340, RSMo and 8 CSR 30-3.010 to 8 CSR 30-3.060)

Name of <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Subcontractor Wellington Environmental				Address of Contractor or Subcontractor: 607 Hanley Industrial Court City: St Louis State: MO ZIP: 63144 Phone Number: ( 314 ) 644 - 4930											
Name of Public Body Armstrong Elevator - Melvin Price Federal Blding				Address of Public Body: 750 Missouri Ave City: East St Louis State: IL ZIP: 62201 Phone Number: ( 727 ) 323 - 3800											
Payroll No. 4-REVISION	For Week Ending 02 / 07 / 2021	AWO	Project and Location Melvin Price Federal Building, East St Louis, IL 62201										Project or Contract No. Elevator Shaft #4		

1. Name and Address of Employee	2. Occupational Title ***	3. Day and Date							4. Total Hours	5. Hourly Rate	6. Gross Amt Project / Week	7. Deductions					8. Net Wages Paid for Week
		Day	M	T	W	Th	F	Sa				Su	FICA and Medicare	Federal and State Withholding Tax	Other A	Other B	
		Date	1	2	3	4	5	6			7						
		Hours Worked Each Day															
William Delay (b) (6)	Laborer (Building): General	DT									875.28						
		OT										110.29	97.85	88.72	34.00	330.86	\$ 1,110.82
		ST	8.00	8.00	8.00					24.00	36.47	1,441.68					
Michael Alvey (b) (6)	Laborer (Building): General	DT									875.28						
		OT										110.28	244.93	88.30		443.51	\$ 998.17
		ST	8.00	8.00	8.00					24.00	36.47	1,441.68					
Raymond Richardson (b) (6)	Laborer (Building): General	DT									875.28						
		OT										108.45	201.55	87.46	128.03	525.49	\$ 892.19
		ST	8.00	8.00	8.00					24.00	36.47	1,417.68					
		DT															
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		ST															
		DT															
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\*\*\* If a worker performs work in more than one occupational title, you must separately list the hours worked per occupational title and wage rates. \*\*\*



### FRINGE BENEFITS

In addition to the basic rates paid to each laborer or mechanic on the payroll, payments have been or will be made to appropriate programs for the benefit of these employees as shown in the following chart below. If fringe benefit amounts paid are the same for all employees, you may list the amount of each such identical fringe payment only once in the appropriate column; if the fringe benefit amounts vary by employee, list each employee's name and set out the amounts paid on behalf of each employee for each fringe benefit.

Employee Name	Health and Welfare (\$/hr)	Pension (\$/hr)	Vacation (\$/hr)	Holiday (\$/hr)	Apprentice Training (\$/hr)	Other C (\$/hr)	Other D (\$/hr)	Total (\$/hr)	If "Other/Deduction" or Fringes, please explain. (Indicate Other A, B, C or D)	Identify by name, the plan, fund, or programs to which fringe benefits are paid. (Indicate H&W, Pension, etc.)
William Delay	8.25	7.00	1.00		0.45	0.37	0.20	\$17.27	A - Local Union 42 B- Misc	Local 42 - Laborers Union
Michael Alvey									A - Local Union 42	Local 42 - Laborers Union
Raymond Richardson									A - Local Union 42 B - Child Support/401K	Local 42 - Laborers Union

Date: 03/10/2021

I, Stella Benson (Name of Signatory Party), Accounting Manager (Title) do hereby state:

(1) That I pay or supervise the payment of the persons employed by Wellington Environmental (Contractor or Subcontractor) on the Armstrong Elevator-Melvin Price Federal Bldg (Building or Work); that during the payroll period commencing seven (7) days prior to the week ending date of 02/07/2021 all persons employed on said project have been paid the full weekly wages stated above, that no rebates have been or will be made either directly or indirectly to or on behalf of Wellington Environmental (Contractor or Subcontractor), from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than legally permissible deductions, that full and accurate records clearly indicating the names, occupations, and crafts of every worker employed by them in connection with the public work together with an accurate record of the number of hours worked by each worker and the actual wages paid for each class or type of work performed and deduction made for each worker have been prepared, that these payroll records are kept and have been provided for inspection to the authorized representative of the contracting public body and will be available as often as may be necessary and such records shall not be destroyed or removed from the state for the period of one year following the completion of the public work in connection with which the records are made.

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage order incorporated into the contract; that the occupational title set forth herein for each laborer or mechanic conform with the work performed.

Name and Title	Signature
Stella Benson, Accounting Manager	(b) (6)
The falsification of any of the above statements may subject the contractor or subcontractor to criminal prosecution. See Sections 290.340, 570.090,	

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MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS  
**CONTRACTOR PAYROLL RECORDS**  
 (See Sections 290.210 to 290.340, RSMo and 8 CSR 30-3.010 to 8 CSR 30-3.060)

Name of <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Subcontractor Wellington Environmental				Address of Contractor or Subcontractor: 607 Hanley Industrial Court City: St Louis State: MO ZIP: 63144 Phone Number: ( 314 ) 644 - 4930											
Name of Public Body Armstrong Elevator - Melvin Price Federal Blding				Address of Public Body: 750 Missouri Ave City: East St Louis State: IL ZIP: 62201 Phone Number: ( 727 ) 323 - 3800											
Payroll No. 5-REVISION	For Week Ending 02 / 14 / 2021	AWO	Project and Location Melvin Price Federal Building, East St Louis, IL 62201										Project or Contract No. Elevator Shaft #4		

1. Name and Address of Employee	2. Occupational Title ***	3. Day and Date							4. Total Hours	5. Hourly Rate	6. Gross Amt Project / Week	7. Deductions					8. Net Wages Paid for Week	
		Day	M	T	W	Th	F	Sa				Su	FICA and Medicare	Federal and State Withholding Tax	Other A	Other B		Total Deductions
		Date	8	9	10	11	12	13				14						
William Delay (b) (6)	Laborer (Building): General	DT										291.76	62.10	11.00	17.63	0.00	90.73	\$ 721.03
		OT																
		ST		4.00					4.00	8.00	36.47							
Michael Alvey (b) (6)	Laborer (Building): General	DT										145.88	60.13	71.93	8.75		140.81	\$ 645.07
		OT																
		ST		4.00						4.00	36.47							
Raymond Richardson (b) (6)	Laborer (Building): General	DT										145.88	31.91	18.51	26.24	80.57	157.23	\$ 259.85
		OT																
		ST							4.00	4.00	36.47							
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# FRINGE BENEFITS

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Employee Name	Health and Welfare (\$/hr)	Pension (\$/hr)	Vacation (\$/hr)	Holiday (\$/hr)	Apprentice Training (\$/hr)	Other C (\$/hr)	Other D (\$/hr)	Total (\$/hr)	If "Other/Deduction" or Fringes, please explain. (Indicate Other A, B, C or D)	Identify by name, the plan, fund, or programs to which fringe benefits are paid. (Indicate H&W, Pension, etc.)
William Delay	8.25	7.00	1.00		0.45	0.37	0.20	\$17.27	A - Local Union 42	Local 42 - Laborers Union
Michael Alvey									A - Local Union 42	Local 42 - Laborers Union
Raymond Richardson									A - Local Union 42 B - Child Support/401K	Local 42 - Laborers Union

Date: 03/10/2021

I, Stella Benson (Name of Signatory Party), Accounting Manager (Title) <sup>(b) (6)</sup> do hereby state:

(1) That I pay or supervise the payment of the persons employed by Wellington Environmental (Contractor or Subcontractor) on the Armstrong Elevator-Melvin Price Federal Bldg (Building or Work); that during the payroll period commencing seven (7) days prior to the week ending date of 02/14/2021 all persons employed on said project have been paid the full weekly wages stated above, that no rebates have been or will be made either directly or indirectly to or on behalf of Wellington Environmental (Contractor or Subcontractor), from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than legally permissible deductions, that full and accurate records clearly indicating the names, occupations, and crafts of every worker employed by them in connection with the public work together with an accurate record of the number of hours worked by each worker and the actual wages paid for each class or type of work performed and deduction made for each worker have been prepared, that these payroll records are kept and have been provided for inspection to the authorized representative of the contracting public body and will be available as often as may be necessary and such records shall not be destroyed or removed from the state for the period of one year following the completion of the public work in connection with which the records are made.

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage order incorporated into the contract; that the occupational title set forth herein for each laborer or mechanic conform with the work performed.

Name and Title	Sign
Stella Benson, Accounting Manager	<div style="background-color: black; color: red; text-align: center; width: 150px; height: 50px;">(b) (6)</div>
The falsification of any of the above statements may subject the contractor or subcontractor to criminal prosecution. See Sections 290.340, 570.090,	

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MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS  
**CONTRACTOR PAYROLL RECORDS**  
 (See Sections 290.210 to 290.340, RSMo and 8 CSR 30-3.010 to 8 CSR 30-3.060)

Name of <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Subcontractor Wellington Environmental				Address of Contractor or Subcontractor: 607 Hanley Industrial Court City: St Louis State: MO ZIP: 63144 Phone Number: ( 314 ) 644 - 4930											
Name of Public Body Armstrong Elevator - Melvin Price Federal Blding				Address of Public Body: 750 Missouri Ave City: East St Louis State: IL ZIP: 62201 Phone Number: ( 727 ) 323 - 3800											
Payroll No. 6-REVISED	For Week Ending 02 / 21 / 2021	AWO	Project and Location Melvin Price Federal Building, East St Louis, IL 62201										Project or Contract No. Elevator Shaft #4		

1. Name and Address of Employee	2. Occupational Title ***	3. Day and Date							4. Total Hours	5. Hourly Rate	6. Gross Amt Project Week	7. Deductions					8. Net Wages Paid for Week	
		Day	M	T	W	Th	F	Sa				Su	FICA and Medicare	Federal and State Withholding Tax	Other A	Other B		Total Deductions
		Date	15	16	17	18	19	20				21						
		Hours Worked Each Day																
William Delay (b) (6)	Laborer (Building): General	DT										182.35	46.84	3.00	11.02	0.00	60.86	\$ 551.49
		OT																
		ST		5.00						5.00	36.47	612.35						
Michael Alvey (b) (6)	Laborer (Building): General	DT										164.12	22.94	13.95	18.59		55.48	\$ 244.24
		OT																
		ST		4.50						4.50	36.47	299.72						
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# FRINGE BENEFITS

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Employee Name	Health and Welfare (\$/hr)	Pension (\$/hr)	Vacation (\$/hr)	Holiday (\$/hr)	Apprentice Training (\$/hr)	Other C (\$/hr)	Other D (\$/hr)	Total (\$/hr)	If "Other/Deduction" or Fringes, please explain. (Indicate Other A, B, C or D)	Identify by name, the plan, fund, or programs to which fringe benefits are paid. (Indicate H&W, Pension, etc.)
William Delay	8.25	7.00	1.00		0.45	0.37	0.20	\$17.27	A - Local Union 42	Local 42 - Laborers Union
Michael Alvey									A - Local Union 42	Local 42 - Laborers Union

Date: 03/10/2021

(b) (6)

I, Stella Benson (Name of Signatory Party), Accounting Manager (Title) do hereby state:

(1) That I pay or supervise the payment of the persons employed by Wellington Environmental (Contractor or Subcontractor) on the Armstrong Elevator-Melvin Price Federal Bldg (Building or Work); that during the payroll period commencing seven (7) days prior to the week ending date of 02/21/2021 all persons employed on said project have been paid the full weekly wages stated above, that no rebates have been or will be made either directly or indirectly to or on behalf of Wellington Environmental (Contractor or Subcontractor), from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than legally permissible deductions, that full and accurate records clearly indicating the names, occupations, and crafts of every worker employed by them in connection with the public work together with an accurate record of the number of hours worked by each worker and the actual wages paid for each class or type of work performed and deduction made for each worker have been prepared, that these payroll records are kept and have been provided for inspection to the authorized representative of the contracting public body and will be available as often as may be necessary and such records shall not be destroyed or removed from the state for the period of one year following the completion of the public work in connection with which the records are made.

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage order incorporated into the contract; that the occupational title set forth herein for each laborer or mechanic conform with the work performed.

Name and Title	
Stella Benson, Accounting Manager	Si
The falsification of any of the above statements may subject the contractor or subcontractor to criminal prosecution. See Sections 290.340, 570.09	

(b) (6)

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TDD/TTY: 800-735-2966 Relay Missouri: 711



"General Decision Number: IL20190007 09/06/2019

Superseded General Decision Number: IL20180007

State: Illinois

Construction Types: Building and Residential

Counties: Madison and St Clair Counties in Illinois.

BUILDING CONSTRUCTION PROJECTS (does not include residential construction consisting of single family homes and apartments up to and including 4 stories) & RESIDENTIAL CONSTRUCTION PROJECTS (consisting of single family homes and apartments up to and including 4 stories)

Note: Under Executive Order (EO) 13658, an hourly minimum wage of \$10.60 for calendar year 2019 applies to all contracts subject to the Davis-Bacon Act for which the contract is awarded (and any solicitation was issued) on or after January 1, 2015. If this contract is covered by the EO, the contractor must pay all workers in any classification listed on this wage determination at least \$10.60 per hour (or the applicable wage rate listed on this wage determination, if it is higher) for all hours spent performing on the contract in calendar year 2019. If this contract is covered by the EO and a classification considered necessary for performance of work on the contract does not appear on this wage determination, the contractor must pay workers in that classification at least the wage rate determined through the conformance process set forth in 29 CFR 5.5(a)(1)(ii) (or the EO minimum wage rate, if it is higher than the conformed wage rate). The EO minimum wage rate will be adjusted annually. Please note that this EO applies to the above-mentioned types of contracts entered into by the federal government that are subject to the Davis-Bacon Act itself, but it does not apply to contracts subject only to the Davis-Bacon Related Acts, including those set forth at 29 CFR 5.1(a)(2)-(60). Additional information on contractor

requirements and worker protections under the EO is available  
at [www.dol.gov/whd/govcontracts](http://www.dol.gov/whd/govcontracts).

Modification Number	Publication Date
0	01/04/2019
1	01/11/2019
2	01/18/2019
3	01/25/2019
4	02/01/2019
5	02/22/2019
6	07/12/2019
7	08/02/2019
8	08/09/2019
9	08/16/2019
10	09/06/2019

ASBE0001-003 10/02/2017

	Rates	Fringes
ASBESTOS WORKER/HEAT & FROST INSULATOR.....	\$ 38.70	23.17

BOIL0363-001 01/01/2017

	Rates	Fringes
BOILERMAKER.....	\$ 36.50	29.89

BRIL0008-006 08/01/2017

	Rates	Fringes
Bricklayer, Caulker, Cleaner, Pointer & Stonemason (including Marble Mason, Tile Layer).....	\$ 33.13	22.05

CARP0500-002 05/01/2018

## ST. CLAIR COUNTY

	Rates	Fringes
CARPENTER (Lather, Piledriver, and Millwright)		
Building.....	\$ 38.85	17.10
Residential.....	\$ 29.50	17.10
Carpet Installer (Carpet, Linoleum, Hardwood, and Tile Layer).....	\$ 33.43	17.02

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 CARP0664-002 05/01/2018

## MADISON COUNTY

	Rates	Fringes
CARPENTER (Lather, Piledriver, and Millwright)		
Building.....	\$ 38.85	17.10
Residential.....	\$ 29.50	17.10
Carpet Installer (Carpet, Linoleum, Hardwood, and Tile Layer).....	\$ 33.43	17.02

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 ELEC0309-005 09/03/2018

## MADISON (Remainder) and ST. CLAIR COUNTIES

	Rates	Fringes
ELECTRICIAN		
Building.....	\$ 40.70	31.66%+7.99
Residential.....	\$ 34.54	46.13%

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 ELEC0309-014 09/01/2018

MADISON (Remainder) and  
 ST. CLAIR COUNTIES

	Rates	Fringes
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## ELECTRICAL LOW VOLTAGE WIRING

INSTALLER.....	\$ 34.57	13.84
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Installation, service and maintenance of low-voltage systems which utilizes the transmission and/or transference of voice, sound, vision, or digital for commercial, education, security and entertainment purposes for the following: TV monitoring and surveillance, background/foreground music, intercom and telephone interconnect, field programming, inventory control systems, microwave transmission, multi-media, multiplex, radio page, school, intercom and sound burglar alarms and low voltage master clock systems.

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ELEC0649-003 09/01/2018

MADISON COUNTY (Area West of a North-South line 1 mile East of the West boundaries of Edwardsville, Fort Russell & Moro Twps and North of Hwy 66 West to Mississippi River)

	Rates	Fringes
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## ELECTRICAL LOW VOLTAGE WIRING

## INSTALLER

Installation, service, and maintenance of low-voltage systems which utilizes the transmission and/or transference of voice, sound, vision, or digital for commercial, education, security and entertainment purposes for the following: TV monitoring and surveillance, background/foreground music, intercom and telephone interconnect,

field programming,  
 inventory control systems,  
 microwave transmission,  
 multi-media, multiplex,  
 radio page, school,  
 intercom and sound burglar  
 alarms and low voltage  
 master clock systems.....\$ 32.33                      16.77

## ELECTRICIAN

Building Construction.....\$ 42.01                      22.38  
 Residential Construction  
 (Up to and including a six  
 family apartment building,  
 but excluding multi-  
 building apartment  
 complexes or apartment  
 buildings that have  
 commercial stores or  
 professional quarters in  
 conjunction with  
 commercial ventures such  
 as nursing homes, motels,  
 inc.).....\$ 23.28                      10.84

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 ELEV0003-003 01/01/2019

Rates                      Fringes

ELEVATOR MECHANIC.....\$ 50.09                      33.705+a+b

## FOOTNOTES:

a) Employer contributes 8% of regular basic hourly rate as  
 as vacation pay credit for employees with more than 5 years  
 of service, and 6% for less than 5 years of service

b) Eight paid holidays: New Year's Day, Memorial Day,  
 Independence Day, Labor Day, Thanksgiving Day Friday after  
 Thanksgiving Day, Veterans' Day and Christmas Day.

ENGI0520-003 08/01/2018

	Rates	Fringes
POWER EQUIPMENT OPERATOR		
Group 01.....	\$ 38.30	32.15
Group 02.....	\$ 37.17	32.15
Group 03.....	\$ 32.69	32.15
Group 04.....	\$ 32.75	32.15
Group 05.....	\$ 32.42	32.15
Group 06.....	\$ 40.85	32.15
Group 07.....	\$ 41.15	32.15
Group 08.....	\$ 41.43	32.15
Group 09.....	\$ 39.30	32.15
Group 10.....	\$ 40.30	32.15
Group 11.....	\$ 40.30	32.15
Group 12.....	\$ 41.30	32.15

## POWER EQUIPMENT OPERATOR CLASSIFICATIONS

GROUP 1: Cranes, Draglines, Shovels, Skimmer Scoops, Clamshells or Derrick Boats, Pile Drivers, Crane-Type Backhoes, Asphalt Plant Operators, Concrete Plant Operators, Dredges, Asphalt Spreading Machines, Screws on Asphalt Spreading Machines, All Locomotives, Cable Ways or Tower Machines, Hoists, Hydraulic Backhoes, Ditching Machines, or Backfiller, Cherrypickers, overhead Cranes, Roller, Steam or Gas, Concrete Pavers, Excavator Concrete Breakers, Concrete Pumps, Bulk Cement Plants, Cement Pumps, DerrickType Drills, Boat Operators, Motor Graders or Pushcats, Scoops or Toumapulls, Bulldozers, Endloaders or Fork Lifts, Power Blade or Elevating Graders, Winch Cats, Boom or Winch Trucks or Boom Tractors, Pipe Wrapping or Painting Machines, Asphalt Plant Engineer, Journeyman Lubricating Engineer, Drills (other than derrick type), Mud Jacks, or Well Drilling Machines, Boring Machines or Track Jacks, Mixers, Conveyors (two), Air Compressors (two) Water Pumps, regardless of size (two), Welding Machines (two), Siphons or Jets (two), Winch Head or Apparatuses (two), Light Plants (two), Waterblasters (two), all Tractors, regardless of size (straight tractor only), Fireman on

Stationary Boilers, Automatic Elevators, Form Grading Machines, Finishing Machines, Power Sub-Grader or Ribbon Machines, Longitudinal Floats, Distributor Operators on Trucks, Winch Heads or Apparatuses (one), Mobil Track air and heaters (two to five), Heavy Equipment Greaser, Relief Operator, Assistant Master Mechanic and Heavy Duty Mechanic, concrete saws of all types and sizes with their attachments, gobhoppers, excavators all sizes, the repair, greasing, and fueling of all diesel hammers, the operation, set-up and cleaning of bidwells, concrete placement booms, the alterations, repair of all barges, water blasters of all sizes and their clutches, mobile lifts, hydraulic jacks where used for hoisting, diesel or gas powered flashing sings used for traffic control, micro pavers, log skidders, iceolators used on and off of pipeline, condor cranes, drill rigs of all sizes, bow boats, survey boats, ross carriers, bob-cats and all their attachments, skid steer loaders and all their attachments, creter crane, direct drive electric motors the bolting and unbolting the adjusting and shimming, (dewatering jobs, whirley crane, conveyor belts) etc., batch plants (all sizes), roto mills, conveyors systems of any size and any configuration, hydroseeders and strawblowers all sizes, operation, repair, service of all vibratory hammers, all power pacs and their controls regardless of location, curtains or brush burning machines, stump cutter machines, grout machines regardless of size, Nail launchers when mounted on a machine or self-propelled, con-cover machines, Goldhofer and similar S.P.M.T. (self-propelled modular transpmiers) heavy transport units and all Operators (except those listed below).

#### Group 2: Assistant Operators

GROUP 3: Air Compressor One; Water Pump regardless of size One; Welding Machine One; 1-Bag Mixer One; Conveyor One; Siphon or Jet; Light Plant One; Heater One; Immobile Track Air One

GROUP 4: Firemen on Whirlies and Asphalt Spreader Oiler; Heavy Equipment Oilers; Truck Cranes; Monigans; Large over

65 tons capacity; Concrete Plant Oiler and Black Top Plant  
Oiler

GROUP 5: Oilers

GROUP 6: Operators on equipment with Booms, including Jibs,  
100 ft and over, but less than 150 ft

GROUP 7: Operators on equipment with Booms, including Jibs,  
150 ft and over, but less than 200 ft

GROUP 8: Operators on equipment with Boomns, including Jibs,  
200 ft and over; Tower Cranes, and Whirley Cranes

GROUP 9: Certified crane Operators, Below 17.5 tons, when  
requested by the Contractor or required by the Owner.

GROUP 10: Certified crane Operators 17.5 tons and above, when  
requested by the Contractor or required by the Owner.

GROUP 11: Master Mechanic

GROUP 12: Licensed Boat Pilot

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IRON0392-004 08/01/2018

	Rates	Fringes
IRONWORKER.....	\$ 32.50	27.38

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LAB00044-001 08/01/2017

MADISON COUNTY (Southwest)

	Rates	Fringes
LABORER		
Group 1.....	\$ 25.76	27.48
Group 2.....	\$ 26.26	27.48
Group 3.....	\$ 27.26	27.48



## LABORER CLASSIFICATIONS:

GROUP 1 - General Laborer

GROUP 2 - Asbestos Abatement Worker and Hazardous Waste  
Worker; Lead Base Paint Worker

GROUP 3 - Dynamite Man

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LAB00100-001 08/01/2017

ST CLAIR COUNTY (East St. Louis,Alcoa, Brooklyn,Cahokia,  
Caseyville,Centreville, Dupo, Fairmont City, French Village,  
Midway, Maplewood, National City)

	Rates	Fringes
LABORERS		
Group 1.....	\$ 30.79	22.45
Group 2.....	\$ 31.29	22.45
Group 3.....	\$ 32.29	22.45

## LABORER CLASSIFICATIONS:

GROUP 1 - General Laborer

GROUP 2 - Asbestos Abatement Worker and Hazardous Waste  
Worker; Lead Base Paint Worker, Hod Carrier

GROUP 3 - Dynamite Man

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LAB00218-002 08/01/2017

MADISON COUNTY (Northwest)

	Rates	Fringes
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## LABORERS

Group 1.....	\$ 30.59	22.65
Group 2.....	\$ 31.09	22.65
Group 3.....	\$ 32.09	22.65

## LABORER CLASSIFICATIONS:

GROUP 1 - General Laborer

GROUP 2 - Asbestos Abatement Worker and Hazardous Waste  
Worker; Lead Base Paint Worker

GROUP 3 - Dynamite Man

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LAB00338-001 08/01/2017

MADISON COUNTY (Westside)

	Rates	Fringes
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## LABORERS

Group 1.....	\$ 30.13	23.11
Group 2.....	\$ 30.63	23.11
Group 3.....	\$ 31.63	23.11

## LABORER CLASSIFICATIONS:

GROUP 1 - General Laborer

GROUP 2 - Asbestos Abatement Worker and Hazardous Waste  
Worker; Lead Base Paint Worker

GROUP 3 - Dynamite Man

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LAB00397-001 08/01/2017

MADISON COUNTY (Southeast)

	Rates	Fringes
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LABORERS

Group 1.....	\$ 30.79	22.45
Group 2.....	\$ 31.29	22.45
Group 3.....	\$ 32.29	22.45

LABORER CLASSIFICATIONS:

GROUP 1 - General Laborer

GROUP 2 - Asbestos Abatement Worker and Hazardous Waste  
Worker; Lead Base Paint Worker

GROUP 3 - Dynamite Man

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LAB00459-001 08/01/2017

ST. CLAIR COUNTY (South)

Rates	Fringes
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LABORERS

Group 1.....	\$ 28.63	24.61
Group 2.....	\$ 29.13	24.61
Group 3.....	\$ 30.13	24.61

LABORER CLASSIFICATIONS:

GROUP 1 - General Laborer

GROUP 2 - Asbestos Abatement Worker and Hazardous Waste  
Worker; Lead Base Paint Worker

GROUP 3 - Dynamite Man

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LAB00670-002 08/01/2017

ST CLAIR COUNTY (Northeast)

	Rates	Fringes
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## LABORERS

Group 1.....	\$ 28.05	25.19
Group 2.....	\$ 28.55	25.19
Group 3.....	\$ 29.55	25.19

## LABORER CLASSIFICATIONS:

GROUP 1 - General Laborer

GROUP 2 - Asbestos Abatement Worker and Hazardous Waste  
Worker; Lead Base Paint Worker

GROUP 3 - Dynamite Man

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LAB00742-003 08/01/2017

ST. CLAIR COUNTY (Eastside)

	Rates	Fringes
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## LABORERS

Group 1.....	\$ 26.37	26.87
Group 2.....	\$ 26.87	26.87
Group 3.....	\$ 27.87	26.87

## LABORER CLASSIFICATIONS:

GROUP 1 - General Laborer

GROUP 2 - Asbestos Abatement Worker and Hazardous Waste  
Worker; Lead Base Paint Worker

Group 3 - Dynamite Man

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PAIN0058-005 05/01/2017

	Rates	Fringes
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## PAINTER

Building.....	\$ 31.25	17.12
Residential.....	\$ 29.95	17.12

Epoxy or Toxic-Lead-Based Paint Work-\$1.00 Premium

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PAIN0513-003 11/01/2016

BOND, CALHOUN, CLINTON, GREENE, JACKSON, JERSEY, MACOUPIN  
(Southside), MADISON, MARION, MONROE, PERRY, RANDOLPH, ST.  
CLAIR, AND WASHINGTON COUNTIES

	Rates	Fringes
GLAZIER.....	\$ 33.40	24.80

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PLAS0090-003 08/01/2017

	Rates	Fringes
CEMENT MASON.....	\$ 33.90	24.25
PLASTERER.....	\$ 31.00	18.95
TERRAZZO WORKER/SETTER.....	\$ 17.55	0.00
TILE SETTER.....	\$ 11.70	1.605

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PLUM0101-002 07/01/2019

ST. CLAIR COUNTY (BELLEVILLE, FAYETTEVILLE, FREESBURG, LEBANON,  
LENZBERG, MASCOUHAH, MARISSA, MILLSTADT, NEW ATHENS, SCOTT AFB,  
SHILOH, SMITHON, ST. LIBORY, SUMMERFIELD, and SWANSEE)

	Rates	Fringes
PLUMBER/PIPEFITTER.....	\$ 40.05	16.78

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PLUM0360-002 07/01/2019

MADISON (GRANITE CITY &amp; SOUTHERN HALF OF COUNTY) and ST. CLAIR

## (EAST ST. LOUIS &amp; VIC.) COUNTIES

	Rates	Fringes
PLUMBER.....	\$ 39.95	16.85

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PLUM0439-001 01/01/2019

MADISON (Grant City and Southern Half of County) and ST. CLAIR  
(East St. Louis and Vic) Counties

	Rates	Fringes
Steamfitter.....	\$ 40.25	19.14

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PLUM0553-002 01/01/2019

MADISON COUNTY (North of East - West which is one mile North of  
South line of Chouteau, Edwardsville, Oak, Marine, and Saline  
Townships)

	Rates	Fringes
PLUMBER/PIPEFITTER.....	\$ 43.06	15.10

## FOOTNOTES:

A. 4 HOURS PAID FOR CHRISTMAS EVE IF HOLIDAY FALLS ON MONDAY  
THRU FRIDAY.

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ROOF0002-004 03/01/2018

	Rates	Fringes
ROOFER.....	\$ 32.70	17.97

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\* SFIL0268-001 09/01/2019

## WITHIN A 30 MILE RADIUS OF ST. LOUIS, MO

	Rates	Fringes
Sprinkler Fitters.....	\$ 45.21	24.62

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SFIL0669-001 04/01/2019

## REMAINDER OF COUNTIES

	Rates	Fringes
SPRINKLER FITTER.....	\$ 41.87	22.93

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SHEE0268-002 07/01/2017

	Rates	Fringes
Sheet Metal Worker		
Building.....	\$ 34.27	20.20
Residential.....	\$ 23.12	12.23

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TEAM0050-003 05/01/2019

## ST CLAIR COUNTY

	Rates	Fringes
TRUCK DRIVER		
Group 1.....	\$ 38.17	19.85
Group 2.....	\$ 38.71	19.85
Group 3.....	\$ 39.01	19.85
Group 4.....	\$ 39.34	19.85
Group 5.....	\$ 40.39	19.85

## CLASSIFICATIONS:

GROUP 1: Drivers on 2 axles hauling less than 9 tons; air compressor & welding machines and brooms, including those pulled by separate units; Truck Driver Helper, warehouse

employees; Mechanic Helpers; greasers and tiremen; pick-up trucks when hauling material, tools, or workers to and from and on the job site; and forklifts up to 6,000 lb capacity.

GROUP 2: 2 or 3 axles hauling more than 9 tons but hauling less than 16 tons; A-frame winch trucks; hydrolift trucks; Vactor Trucks or similar equipment when used for transportation purposes; Forklift over 6,000 lb.capacity; winch trucks; and four axle combination units.

GROUP 3: 2, 3 or 4 Axles hauling 16 tons or more; 5-Axles or more combination units; drivers on water pulls; articulated dump trucks; mechanics and working forepersons.

GROUP 4: Low Boy and Oil Distributors.

GROUP 5: Drivers who require special protective clothing while employed on hazardous waste work.

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TEAM0525-002 05/01/2019

MADISON COUNTY

	Rates	Fringes
TRUCK DRIVER		
Group 1.....	\$ 38.17	19.85
Group 2.....	\$ 38.71	19.85
Group 3.....	\$ 39.01	19.85
Group 4.....	\$ 39.34	19.85
Group 5.....	\$ 40.39	19.85

#### CLASSIFICATIONS:

GROUP 1: Drivers on 2 axles hauling less than 9 tons; air compressor & welding machines and brooms, including those pulled by separate units; Truck Driver Helper, warehouse employees; Mechanic Helpers; greasers and tiremen; pick-up trucks when hauling material, tools, or workers to and from and on the job site; and forklifts up to 6,000 lb capacity.



GROUP 2: 2 or 3 axles hauling more than 9 tons but hauling less than 16 tons; A-frame winch trucks; hydrolift trucks; Vactor Trucks or similar equipment when used for transportation purposes; Forklift over 6,000 lb.capacity; winch trucks; and four axle combination units.

GROUP 3: 2, 3 or 4 Axles hauling 16 tons or more; 5-Axles or more combination units; drivers on water pulls; articulated dump trucks; mechanics and working forepersons.

GROUP 4: Low Boy and Oil Distributors.

GROUP 5: Drivers who require special protective clothing while employed on hazardous waste work.

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WELDERS - Receive rate prescribed for craft performing operation to which welding is incidental.

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Note: Executive Order (EO) 13706, Establishing Paid Sick Leave for Federal Contractors applies to all contracts subject to the Davis-Bacon Act for which the contract is awarded (and any solicitation was issued) on or after January 1, 2017. If this contract is covered by the EO, the contractor must provide employees with 1 hour of paid sick leave for every 30 hours they work, up to 56 hours of paid sick leave each year. Employees must be permitted to use paid sick leave for their own illness, injury or other health-related needs, including preventive care; to assist a family member (or person who is like family to the employee) who is ill, injured, or has other health-related needs, including preventive care; or for reasons resulting from, or to assist a family member (or person who is like family to the employee) who is a victim of, domestic violence, sexual assault, or stalking. Additional information on contractor requirements and worker protections under the EO is available at [www.dol.gov/whd/govcontracts](http://www.dol.gov/whd/govcontracts).

Unlisted classifications needed for work not included within the scope of the classifications listed may be added after award only as provided in the labor standards contract clauses (29CFR 5.5 (a) (1) (ii)).

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The body of each wage determination lists the classification and wage rates that have been found to be prevailing for the cited type(s) of construction in the area covered by the wage determination. The classifications are listed in alphabetical order of ""identifiers"" that indicate whether the particular rate is a union rate (current union negotiated rate for local), a survey rate (weighted average rate) or a union average rate (weighted union average rate).

#### Union Rate Identifiers

A four letter classification abbreviation identifier enclosed in dotted lines beginning with characters other than ""SU"" or ""UAVG"" denotes that the union classification and rate were prevailing for that classification in the survey. Example: PLUM0198-005 07/01/2014. PLUM is an abbreviation identifier of the union which prevailed in the survey for this classification, which in this example would be Plumbers. 0198 indicates the local union number or district council number where applicable, i.e., Plumbers Local 0198. The next number, 005 in the example, is an internal number used in processing the wage determination. 07/01/2014 is the effective date of the most current negotiated rate, which in this example is July 1, 2014.

Union prevailing wage rates are updated to reflect all rate changes in the collective bargaining agreement (CBA) governing this classification and rate.

#### Survey Rate Identifiers

Classifications listed under the ""SU"" identifier indicate that

no one rate prevailed for this classification in the survey and the published rate is derived by computing a weighted average rate based on all the rates reported in the survey for that classification. As this weighted average rate includes all rates reported in the survey, it may include both union and non-union rates. Example: SULA2012-007 5/13/2014. SU indicates the rates are survey rates based on a weighted average calculation of rates and are not majority rates. LA indicates the State of Louisiana. 2012 is the year of survey on which these classifications and rates are based. The next number, 007 in the example, is an internal number used in producing the wage determination. 5/13/2014 indicates the survey completion date for the classifications and rates under that identifier.

Survey wage rates are not updated and remain in effect until a new survey is conducted.

#### Union Average Rate Identifiers

Classification(s) listed under the UAVG identifier indicate that no single majority rate prevailed for those classifications; however, 100% of the data reported for the classifications was union data. EXAMPLE: UAVG-OH-0010 08/29/2014. UAVG indicates that the rate is a weighted union average rate. OH indicates the state. The next number, 0010 in the example, is an internal number used in producing the wage determination. 08/29/2014 indicates the survey completion date for the classifications and rates under that identifier.

A UAVG rate will be updated once a year, usually in January of each year, to reflect a weighted average of the current negotiated/CBA rate of the union locals from which the rate is based.

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#### WAGE DETERMINATION APPEALS PROCESS

1.) Has there been an initial decision in the matter? This can

be:

- \* an existing published wage determination
- \* a survey underlying a wage determination
- \* a Wage and Hour Division letter setting forth a position on a wage determination matter
- \* a conformance (additional classification and rate) ruling

On survey related matters, initial contact, including requests for summaries of surveys, should be with the Wage and Hour Regional Office for the area in which the survey was conducted because those Regional Offices have responsibility for the Davis-Bacon survey program. If the response from this initial contact is not satisfactory, then the process described in 2.) and 3.) should be followed.

With regard to any other matter not yet ripe for the formal process described here, initial contact should be with the Branch of Construction Wage Determinations. Write to:

Branch of Construction Wage Determinations  
Wage and Hour Division  
U.S. Department of Labor  
200 Constitution Avenue, N.W.  
Washington, DC 20210

2.) If the answer to the question in 1.) is yes, then an interested party (those affected by the action) can request review and reconsideration from the Wage and Hour Administrator (See 29 CFR Part 1.8 and 29 CFR Part 7). Write to:

Wage and Hour Administrator  
U.S. Department of Labor  
200 Constitution Avenue, N.W.  
Washington, DC 20210

The request should be accompanied by a full statement of the interested party's position and by any information (wage payment data, project description, area practice material, etc.) that the requestor considers relevant to the issue.

3.) If the decision of the Administrator is not favorable, an interested party may appeal directly to the Administrative Review Board (formerly the Wage Appeals Board). Write to:

Administrative Review Board  
U.S. Department of Labor  
200 Constitution Avenue, N.W.  
Washington, DC 20210

4.) All decisions by the Administrative Review Board are final.

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END OF GENERAL DECISION"